Fairfax County Department of Housing and Community Development

Housing Management Division 3700 Pender Drive, Suite 100 ¹ Fairfax, Virginia 22030-7442 Voice (703) 385-3662 ¹ TTY 385-3578



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CASTELLANI MEADOWS RENTAL PRE-APPLICATION

Social Security Number				
Last Name	First Name	e	M.I	
Address			Apt. #	
City	State		Zip	
Home Phone	Work Phone			
Income In	formation (Before Taxe	s) for All Persons 18 year	rs and Older	
Gross family income: Wages \$		Income from Social Secu	rity \$	
•	ly Biweekly Monthly		Ψ	
Income/Interest from assets \$	AFDC \$	SSI \$Child Supp	oort/Alimony \$	
	Ethnic I	nformation		
This informati	ion is for statistical purposes on	nly. Please check the group to wh	hich you belong.	
White Black	American Indian/Native Alaskan Check one: Asian/Pacific Islander		one: Hispanic Non-Hispanic	
	Number of Family M	lembers Employed		
1. Employer's Name	Em	ployee's Name		
Address				
City		State	Zip	
2. Employer's Name	Em	ployee's Name		
Address				
City		State	Zip	
Employed by Fairfax County Government	?r Yes r No Employed by	Fairfax County Public Schools	? r Yes r No	
	Persons to	Occupy Unit		
Name	Relationship HEAD	Social Security #	Date of Birth	Sex
1				
2 3				
4				
5				
6				
Special Needs:				
Are you or any member of your household				
Have you previously applied for this progra	* *			
SignatureInformation furnished to the Fairfax County Departm	Da	te	using Authority will be mainte	ined and disc

Information furnished to the Fairfax County Department of Housing and Community Development and Redevelopment and Housing Authority will be maintained and disseminated inaccordance with the Freedom of Information Act, Code of Virginia, Sections 2.1-340 through 346.1, as amended, and the Privacy Protection Act of 1976, Code of Virginia Sections, 2.1-377 through 386, as amended.